

Attorney Docket No.: 2132.111.
Inventor Name: Jackowski et al.
COMPLETE IF KNOWN

Application No:
Filing Date:
Group Art Unit:
Examiner Name:

My residence, post office addr., and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

APOLIPOPROTEIN BIOPOLMER MARKERS PREDICTIVE OF TYPE II DIABETES

 is attached hereto OR
 was filed on As United States Application No. or PCT Intl.
 Appln. No. and was amended on (if
 applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

PRIOR FOREIGN NUMBERS:	COUNTRY:	FOREIGN FILING DATE:	PRIORITY NOT CLAIMED:	CERTIFIED Yes	COPY No
			_____	_____	_____
			_____	_____	_____
			_____	_____	_____

Additional foreign appln. nos. are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below:

APPLICATION NUMBER(s) : FILING DATE:

— Addnl. provisional appln.
Nos. are listed on a
Supplementary priority data
Sheet PTO/SB/02B attached.

DECLARATION - UTILITY or DESIGN PATENT APPLICATION

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. PARENT APPLICATION
or PCT NUMBER:

PARENT FILING DATE:

PARENT PATENT NO:
(if applicable)

Additional U.S. or PCT international appln.nos. are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: X Customer No: 21917 PLACE CUSTOMER No.
BAR CODE LABEL HERE

OR

Registered practitioner(s) name/registration no. listed below.			
NAME:	REGISTRATION NO:	NAME:	REGISTRATION NO:
Michael A. Slavin	34,016	Joseph Beckman	45,529
Ferris H. Lander	43,377	Erin Monahan	48,804
C. Fred Rosenbaum	27,110		

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 17 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR: _____ A Petition has been filed for this unsigned inv.
GIVEN NAME (first and middle [if any]): _____ FAMILY NAME OR SURNAME: _____

George _____ Jackowski _____
Inventor's signature: _____ Date: _____
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Additional inventors are being named on the _____ Supplemental additional inventor(s)

NAME OF SECOND INVENTOR: _____ A Petition has been filed for this unsigned inv.
GIVEN NAME (first and middle [if any]): _____ FAMILY NAME OR SURNAME: _____

John _____ Marshall, PhD _____
Inventor's signature: _____ Date: _____
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Additional inventors are being named on the _____ Supplemental additional inventor(s) _____

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